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2292 7590 07/26/2005

BIRCH STEWART KOLASCH & BIRCH, LLP
PO BOX 747
FALLS CHURCH, VA 22040-0747



10/07/2005 MBEYENE2 00000108 09290608

01 FC:2501

700.00

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(Depositor's name)

(Signature)

(D)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
9 09/290,608	04/13/1999	TSUNG-WEI LIN	LIN-2	1084

TITLE OF INVENTION: METHOD OF PROCESSING DIVERSE THREE-DIMENSIONAL GRAPHIC OBJECTS

Adjustment date: 10/07/2005 MBEYENE2

09/17/2003 HTECKLU2 00000078 09290608

01 FC:2501 -650.00 OP

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$50	\$0	\$50	10/26/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
VO, CLIFF N	2676	345-419000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Birch, Stewart, Kolasch & Birch, LLP
2 _____
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Ulead Systems, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Taipei, Taiwan R.O.C.

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

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Issue Fee

Publication Fee (No small entity discount permitted)

Advance Order - # of Copies 4*

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A check in the amount of the fee(s) is enclosed.

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The Director is hereby authorized to charge the required fee(s), or credit any overpayment Deposit Account Number 02-2448 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Joe McKinney

Date October 5, 2005

Typed or printed name Joe McKinney

Registration No. 32,334

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